## **Exhibit 300: Capital Asset Summary**

### Part I: Summary Information And Justification (All Capital Assets)

#### Section A: Overview & Summary Information

Date Investment First Submitted: 2009-06-30
Date of Last Change to Activities: 2012-02-24
Investment Auto Submission Date: 2012-02-24
Date of Last Investment Detail Update: 2011-09-16
Date of Last Exhibit 300A Update: 2012-07-23

Date of Last Revision: 2012-07-23

Agency: 009 - Department of Health and Human Services Bureau: 25 - National Institutes of Health

**Investment Part Code: 01** 

Investment Category: 00 - Agency Investments

1. Name of this Investment: NIH CC Clinical Research Information System (CRIS)

2. Unique Investment Identifier (UII): 009-000001405

Section B: Investment Detail

1. Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.

The Clinical Research Information System (CRIS) supports the medical care and research at the NIH Clinical Center. While providing direct medical care to our patients is key, as the nation's largest research hospital, data collection and analysis for clinical trials is critical to improving the health of the nation. CRIS is a system of multiple modules from Allscripts and is interfaced with many other applications to support the Clinical Center's mission of healthcare research. CRIS has interfaces to multiple applications specific to departments such as radiology, nutrition, surgery, laboratory and pharmacy. This integration provides a central source of data, images and reports for patient care givers and clinical researchers of the NIH intramural program. With the core mission of the NIH as research, CRIS has enabled the intramural program to pool all patient data into one repository creating efficiencies and allowing researchers to analyze increasingly more complex data and results by protocol or across protocols. CRIS continues to meet goals set through a rigorous management oversight and CPIC process. Budget requests are vetted through the CC ITAG and CC executive leadership.CRIS is supported through the NIH Clinical Center Data Center infrastructure as part of the overall NIH IT Infrastructure, which includes dependencies on the availability of power, cooling, network, etc. The integration that allows for a central source for data is dependent on the ancillary, or department specific, systems that feed data into CRIS.

2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.

CRIS is the Electronic Health Record for the Intramural Program at the NIH. The system is used for all ordering, resulting, and clinical documentation for patient and research care for over 350,000 patients, 80,000 of which are currently active. The system provides a mechanism to efficiently care for patients in a safe environment such as ensuring the right medication/test is provided to the right patient at the right time. The patient data from CRIS is fed to the BTRIS system which is the Research Data Repository. As a research facility with the focus on 1400 research studies active at any one time the integrity of the data is critical to the analysis of the research hypothesis and the outcomes defined in the Protocol. This electronic system provides efficiencies in data mining which would be almost impossible if completed manually with paper medical records.

3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

Integration with the surgery system improved the access to the Perioperative documentation. Integration with the respiratory care system improved efficiencies for the respiratory therapists and access to the patient care data. Improved access to 'Read-only' patient care information when the system is unavailable for maintenance. Improved the process for patient identification, documenting specimen collection, and blood product infusion through integration with the barcode system. Ensured current integration maintained during multiple ancillary, department specific, system upgrades. Expanded the use of CRIS to the ICU providing more efficient documentation and allowing better access to ICU notes for all users. Medication List Tab created for improved efficiency when prescribing new medications or when reviewing the patient's current medications.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

Improve the process for patient identification and documentation of the right med given to the right patient at the right time with expanded usage of the integrated barcode system for medication administration. Migrate the CRIS system to the newest version to ensure continued support from the vendor Ensure current integration maintained during additional ancillary, department specific, system upgrades or updates Improve the process surrounding the order and resulting of genetics testing, including pharmacogenomics which provides decision support for medication orders based on the results of the genetics testing.

5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.

Date of Last Revision: 2012-07-23

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### Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding										
	PY-1 & Prior	PY 2011	CY 2012	BY 2013						
Planning Costs:	\$3.2	\$0.0	\$0.0	\$0.0						
DME (Excluding Planning) Costs:	\$53.7	\$0.0	\$0.0	\$0.0						
DME (Including Planning) Govt. FTEs:	\$18.0	\$0.0	\$0.0	\$0.0						
Sub-Total DME (Including Govt. FTE):	\$74.9	0	0	0						
O & M Costs:	\$30.0	\$2.4	\$2.2	\$2.9						
O & M Govt. FTEs:	\$12.7	\$4.0	\$5.3	\$5.3						
Sub-Total O & M Costs (Including Govt. FTE):	\$42.7	\$6.4	\$7.5	\$8.2						
Total Cost (Including Govt. FTE):	\$117.6	\$6.4	\$7.5	\$8.2						
Total Govt. FTE costs:	\$30.7	\$4.0	\$5.3	\$5.3						
# of FTE rep by costs:	96	36	41	41						
Total change from prior year final President's Budget (\$)		\$-1.1	\$-0.4							
Total change from prior year final President's Budget (%)		-14.13%	-4.89%							

# 2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

Yes the Clinical Center reduced funding after receiving the budget in April. This reduction will cause my EVM numbers to be off becasue we have not had the oppoartunity to rebaseline.

### Section D: Acquisition/Contract Strategy (All Capital Assets)

				Table I	.D.1 Contracts a	and Acquisition S	trategy				
Contract Type	EVM Required	Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Туре	PBSA ?	Effective Date	Actual or Expected End Date
Awarded		HHSN2692009 00064									
Awarded		HHSN2692000 4									
Awarded		HHSN2692003 0002c									
Awarded		Simplified Acquisition									
Awarded		Simplified Acquisition									
Awarded		HHSN2692010 00007P									
Awarded		HHSN2692010 00004P									
Awarded		HHSN2692010 00048P									
Awarded		HHSN2692010 00016P									
Awarded		HHSN2692010 00079P									
Awarded		HHSN2692010 00007P-0001									
Awarded		HHSN2692010 00004P-0001									
Awarded		HHSN2692010 00048P-0001									
Awarded		HHSN2692010 00016P-0001									
Awarded		HHSN2692011 00180U									

Table I.D.1 Contracts and Acquisition Strategy											
Contract Type EVM Requir	ed Contracting Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Туре	PBSA ?	Effective Date	Actual or Expected End Date	
Awarded	HHSN2692011 00126P										
Awarded	HHSN2692010 00007P										
Awarded	HHSN2693999 900028i										
Awarded	HSSN26399990 0028i	)									

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why: CRIS is Steady State; we continue to use Earned Value via our contract CSC. Many of our annual contracts are for hardware or software maintenance support renewals. CSC actually tracks EVM for all our other contracts that do not have EVM specifically included in their own contract. All of our annual maintenance contracts are Firm Fixed Price.

Page 7 / 11 of Section300 Date of Last Revision: 2012-07-23 Exhibit 300 (2011)

# **Exhibit 300B: Performance Measurement Report**

**Section A: General Information** 

Date of Last Change to Activities: 2012-02-24

### Section B: Project Execution Data

Table II.B.1 Projects										
Project ID	D Project Name				Project Start Date	Project Completion Date		Project Lifecycle Cost (\$M)		
283043	CRIS \	ersion 5.5 Upgrade	This project is to upg core COTS system f current version of 5.0 to version which is 5.5.7 project tasks will be per current O&M FTEs. The includes the lifecycle re of the server hardware the migration of the ser the CC child domain to domain.	rom the to the new All of the formed by the project the placement as well as evers from						
				<b>Activity Summary</b>						
			Roll-up of Information	on Provided in Lowest L	evel Child Activities					
Project ID	Name	Total Cost of Project Activities (\$M)	End Point Schedule Variance (in days)	End Point Schedule Variance (%)	Cost Variance (\$M)	Cost Variance (%)	Total Planned Cost (\$M)	Count of Activities		
283043	CRIS Version 5.5 Upgrade									
	Key Deliverables									
Project Name	Activity Name	Description	Planned Completion	Projected	Actual Completion	Duration	Schedule Variance	Schedule Variance		

Page 8 / 11 of Section300 Date of Last Revision: 2012-07-23 Exhibit 300 (2011)

				Key Deliverables				
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days )	Schedule Variance (%)
			Date	Completion Date	Date	(in days)	(in days )	(%)
283043	283043: Custom Development	Develop plan for handling customizations	2010-12-27	2011-12-04	2011-11-04	13	-312	-2,400.00%
283043	283043: Hardware	Hardware Setup	2011-06-07	2011-06-07	2011-06-07	175	0	0.00%
283043	283043: Project Management	Project Management Activities	2011-07-14	2011-07-14	2011-09-07	212	-55	-25.94%
283043	283043: SCM 5.5 Development Unit Testing	Development Unit Testing	2011-09-12	2011-09-14	2011-09-14	41	-2	-4.88%
283043	283043: Training	User Training	2011-10-18	2012-01-27	2012-01-28	273	-102	-37.36%
283043	283043: Communications and Security	Communications and Security	2011-10-25	2012-01-12	2012-01-12	139	-79	-56.83%
283043	283043: SCM 5.5 Training Activation	Training Activation	2011-10-31	2012-01-13	2012-01-13	12	-74	-616.67%

### Section C: Operational Data

Table II.C.1 Performance Metrics									
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency	
Percent users who find CRIS usefull in their job based on CRIS user satisfaction survey	Likert Scale	Customer Results - Customer Benefit	Over target	51.100000	53.000000		55.000000	Semi-Annual	
Percent users satisfied with the manner in which CRIS supports clinical care based on CRIS user satisfaction survey	Likert Scale	Process and Activities - Productivity	Over target	68.000000	70.000000		72.000000	Semi-Annual	
Percent users satisfied with the manner in which CRIS supports clinical research based on CRIS user satisfaction survey	Likert Scale	Process and Activities - Productivity	Over target	62.000000	64.000000		66.000000	Semi-Annual	
Percent users satisfied with the CRIS support desk based on CRIS user satisfaction survey	Likert Scale	Customer Results - Service Quality	Over target	57.500000	59.000000		61.000000	Semi-Annual	
The mean score for the users overall satisfied with the CRIS traning Program based on student satisfaction survey	Likert Scale	Customer Results - Service Quality	Over target	3.000000	3.500000		4.000000	Monthly	
Percent of scheduled up-time system is available (scheduled up-time is 24x7 excluding scheduled maintenance as negotiated in SLA)	Percent	Technology - Reliability and Availability	Over target	98.300000	99.400000		99.500000	Monthly	

Table II.C.1 Performance Metrics									
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency	
Percent of Service tickets resolved within one business day using data provided by the Remedy Ticket System	Percent	Customer Results - Service Quality	Over target	62.000000	65.000000		68.000000	Monthly	
The number of SCR (System Change Requests) entered per quarter that are processed by CRIS O & M Staff based on data collected and reported by our configuration management system	Number	Process and Activities - Productivity	Over target	300.000000	305.000000		310.000000	Quarterly	
The number of SCR completed by CRIS O&M staff per month based on data collected and reported by our configuration management system	Number	Process and Activities - Productivity	Over target	60.000000	62.000000		64.000000	Monthly	